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APPLICATION NO.	FILING DATE	-	FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/561,844	01/05/2007		Avraham Cohen		032013-133	5513
TITLE OF INVENTION: MONOHYDRATED SODIUM SALT OF S-TENATOPRAZOLE AND THE USE THEREOF IN THERAPY						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DAȚE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	- 07/07/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
RAHMANI, NILOOFAR		1625	514-303000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Sidem Pharma Luxembourg, Luxembourg						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
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5. Change in Entity Sta		· · · · · · · · · · · · · · · · · · ·				OFD 1 27(-)(2)
	s SMALL ENTITY state				LL ENTITY status. See 37 (the assignee or other party in
interest as shown by the	records of the United Sta	tes Patent and Trademark	Office.	the applicant, a regi	stered attorney of agent, or	and undergrave or other party in
Authorized Signature M.M. Hayl Date June 18, 2008						
Typed or printed name Melissa M. Hayworth Registration No. 45774						
an application. Confiden submitting the complete this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the ions for reducing this but irginia 22313-1450. DC 13-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	depending upon the ind depending upon the ind e Chief Information Offi COMPLETED FORMS	ividual case. Any cocer, U.S. Patent and TO THIS ADDRESS	omments on the amount of the Trademark Office, U.S. De	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.